## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10749430

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			19		10010			RATE	FEE	<b>1</b>	RATE	FEE	
FOR			NUMBER FILED		NILINAD	ED EVTDA		BASIC FEE	<del></del>		BASIC FEE		
FOR					NUMBER EXTRA				383.00	OR	DASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			(9 minus 20=		* 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS					* 0			X43=		OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, ente					"0" in c	olumn 2		TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II								OTHER THAN					
		(Column 1)	1	(Colun		(Column 3)	1	SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
<b>AME</b>	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	╽┟	X43=		OR	X86=		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un			
								+145=		OR	+290=	•	
	•	Αſ	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE							
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=	,	OR	X86=	,	
<b>'</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									- 1			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145= TOTAL		OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					r foun	d in the app	ropriate box	in col	umn 1.		